



Complete Summary

TITLE

In-center hemodialysis patients' satisfaction with care: in-center hemodialysis patients' overall ratings of their kidney doctors.

SOURCE(S)

CAHPS® In-Center Hemodialysis Survey and Reporting Kit 2006. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2006 Oct 17. various p.

CAHPS®: Surveys and tools to advance patient-centered care [https://www.cahps.ahrq.gov/default.asp]. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [updated 2008 Feb 21]; [accessed 2007 Sep 05]. [3 p].

Measure Domain

PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess adult in-center hemodialysis patients' perceptions of their kidney doctor. Patients rate their kidney doctor on a scale from 0 to 10, where 0 is the worst kidney doctor possible and 10 is the best kidney doctor possible. Responses are grouped by rating: percentages are reported for either ratings of 9 and 10, 7 and 8, and 6 and lower **OR** ratings of 10, 8 and 9, and 7 and lower.

Note: The percentage of ratings for the group 9 and 10 (or sometimes 10) is used for consumer-level reporting; higher percentages indicate better quality. Additionally, frequency distributions encompassing all groups of ratings (i.e., 9 and 10, 7 and 8, 6 or lower **OR** 10, 8 and 9, and 7 or lower) are available for plans or providers to use for quality improvement purposes.

RATIONALE

As a result of legislation passed in 1972, Medicare pays for more than two-thirds of the expenditures for care for patients with end-stage renal disease (ESRD). To help ensure that these patients are receiving quality care, the Centers for Medicare & Medicaid Services (CMS) has been reporting comparative clinical information at the facility level since January of 2001 on its Dialysis Facility Compare Web site. However, patient survey results are noticeably absent from the current set of quality measures for ESRD care. In recent years, both the U.S. Office of the Inspector General and MedPac's 2003 Report to Congress noted the need to evaluate the experience of care for ESRD patients. Consequently, in late 2002, CMS requested that the Agency for Healthcare Research and Quality (AHRQ) and the CAHPS grantees produce a patient survey for in-center hemodialysis patients. This request was part of CMS's broader quality agenda for its ESRD program.

The CAHPS In-Center Hemodialysis Survey is designed to assess the experiences of hemodialysis patients who receive care from dialysis facilities. It is intended to serve as a tool that both facilities and End-Stage Renal Disease Networks can use to measure and improve the patient-centeredness of their care.

PRIMARY CLINICAL COMPONENT

End-stage renal disease (ESRD); in-center hemodialysis; patient reports on the kidney doctor

DENOMINATOR DESCRIPTION

In-center hemodialysis patients, age 18 years and older, who answered the "Rating of Kidney Doctors" question on the CAHPS In-Center Hemodialysis Survey (see the related "Description of Case Finding" and the "Denominator Inclusions/Exclusions" fields in the Complete Summary)

NUMERATOR DESCRIPTION

In-center hemodialysis patients' ratings of their kidney doctor on a scale from 0 to 10, where 0 is the worst kidney doctor possible and 10 is the best kidney doctor possible (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- Focus groups
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Using the CAHPS in-center hemodialysis survey to improve quality. Lessons learned from a demonstration project. [Submitted to the Centers for Medicare & Medicaid Services by American Institutes for Research, RAND, Harvard Medical School, Westat, Network 15. Supported by contracts 1-U18 HS13193-01 and 2-U18 HS09204]. Rockville (MD): Agency for Healthcare Quality and Research (AHRQ); 2007. 43 p. [unpublished]

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Collaborative inter-organizational quality improvement
External oversight/Medicare
Internal quality improvement
Quality of care research

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All currently dialyzing in-center hemodialysis patients, age 18 years and older, with at least 3 months of experience on hemodialysis at their current facility

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

In-center hemodialysis patients, age 18 years and older, who answered the "Rating of Kidney Doctors" question on the CAHPS In-Center Hemodialysis Survey. Include refusals, non-responders (never responded, was unavailable at the time of the survey, was ill or incapable, had a language barrier, etc.), and bad addresses/phone numbers.

Exclusions

- Deceased
- Ineligible. The respondent has been a patient at the facility for less than three months, is not a patient at the facility, or is no longer receiving in-center hemodialysis (received a transplant or has switched to peritoneal dialysis).

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition
Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

In-center hemodialysis patients' ratings of their kidney doctor on a scale from 0 to 10, where 0 is the worst kidney doctor possible and 10 is the best kidney doctor possible

Responses are grouped by rating: percentages are reported for ratings of 9 and 10, 7 and 8, and 6 and lower **OR** 10, 8 and 9, and 7 and lower. The higher the percentage of ratings for the group 9 and 10 (or 10) is associated with better quality.

Note: Include all completed questionnaires. A questionnaire is considered complete if responses are available for 12 or more of a selected list of key CAHPS items. Refer to the original measure documentation for more information.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data
Patient survey

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Non-weighted Score/Composite/Scale

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Case-mix adjustment

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

CAHPS recommends adjusting the data for respondent age, education, and self-reported health status.

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Development of the CAHPS In-Center Hemodialysis Survey included:

- Three rounds of cognitive testing of the draft survey in English and Spanish with dialysis patients.
- Pilot testing with 30 facilities representing different regions and unit size.
- A year-and-a-half-long initiative with seven dialysis facilities and four Networks to test the use of the survey as a quality improvement tool.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

CAHPS® In-Center Hemodialysis Survey and Reporting Kit 2006. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2006 Oct 17. various p.

Identifying Information

ORIGINAL TITLE

Rating of kidney doctors.

MEASURE COLLECTION

[CAHPS In-Center Hemodialysis Survey](#)

SUBMITTER

Agency for Healthcare Research and Quality
Centers for Medicare & Medicaid Services

DEVELOPER

Agency for Healthcare Research and Quality
CAHPS Consortium

ENDORSER

National Quality Forum

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2006 Oct

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

CAHPS® In-Center Hemodialysis Survey and Reporting Kit 2006. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2006 Oct 17. various p.

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MEASURE AVAILABILITY

The individual measure, "Rating of Kidney Doctors," is published in the "CAHPS In-Center Hemodialysis Survey and Reporting Kit 2006." This Kit may be downloaded at the [CAHPS Survey Users Network Web site](#). See the related [QualityTools](#) summary.

COMPANION DOCUMENTS

The following are available:

- CAHPS user resources. Quality improvement resources. [Web site]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [updated 2007 Dec 10]; [accessed 2007 Aug 14]. Available from the [CAHPS Web site](#).
- CAHPS user resources: project implementation resources. [Web site]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [updated 2005 Dec 29]; [accessed 2007 May 15]. Available from the [CAHPS Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI on May 14, 2007. The information was verified by the measure developer on July 25, 2007.

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